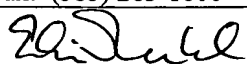
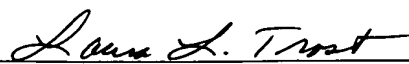


TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/527,924
		Filing Date	September 19, 2003
		First Named Inventor	Finn Larsen
		Group Art Unit	To be Assigned
		Examiner Name	To be Assigned
Total Number of Pages in This Submission	7	Attorney Docket Number	20747/250 (ARDBW/P29268US)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply (\$_____) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (\$_____) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (\$_____) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notice to File Missing Parts/ Incomplete Application (\$_____) <input type="checkbox"/> A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition (\$_____) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (\$_____) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (\$_____) (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input type="checkbox"/> Check in the amount of \$_____ <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Submission of Notification of the Recording of a Change - Form PCT/IB/306 Submission of a Combined Declaration and Power of Attorney Form
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Edwin V. Merkel Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1128 Fax: (585) 263-1600
Signature	 Registration No. 40,087
Date	August 8, 2005

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop PCT, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____	
Date <u>8/8/05</u>	Signature  Laura L. Trost Typed or printed name

Rec'd PCT/PTO 10 AUG 2005

PATENT
20747/250 (ARDBW/P29268US)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Finn LARSEN)
)
Applicant: Ardana Bioscience Limited)
)
U.S. National Application No:)
10/527,924 based on PCT/GB2003/004141)
)
Filed: 19 September 2003)
)
For : EFFERVESCENT FORMULATIONS)
COMPRISING APOMORPHINE)

**SUBMISSIONS OF NOTIFICATION OF THE RECORDING OF A CHANGE
-- FORM PCT/IB/306**

Mail Stop PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits herewith two Notification of the Recording of a Change - Form PCT/IB/306. One PCT/IB/306 form corrects the address of applicant in the PCT application, Ardana Bioscience Limited; and the other PCT/IB/306 form corrects the address of the inventor, Finn LARSEN, in the same PCT application.

Respectfully submitted,

Dated: August 8, 2005

Edwin V. Merkel
Edwin V. Merkel
Registration No. 40,087

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Clinton Square, P. O. Box 31051
Rochester, New York 14603-1051 US
Telephone: 585/263-1128
Facsimile: 585/263-1600

Certificate of Mailing - 37 CFR 1.8(a)	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450, on the date below.	
8/8/05 Date	<u>Laura L. Trost</u> Laura L. Trost